

A circular black and white stamp from the Patent & Trademark Office. The text "PATENT & TRADEMARK OFFICE" is curved along the bottom edge. In the center, the date "FEB 05 2004" is printed. The top half of the stamp is partially obscured by a dark, irregular shape, possibly a hole or a shadow.

Re amt
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In re Application of:

Shigeyuki UZAWA et al.

Application No.: 09/864,309

Filed: May 25, 2001

For: EXPOSURE APPARATUS, COATING/
DEVELOPING SYSTEM, DEVICE
MANUFACTURING SYSTEM, DEVICE
MANUFACTURING METHOD,
SEMICONDUCTOR MANUFACTURING
FACTORY, AND EXPOSURE APPARATUS
MAINTENANCE METHOD

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: Examiner: R. A. Jarrett
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: Group Art Unit: 2125
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: Confirmation No.: 2803

) February 5, 2004

RECEIVED

FEB 10 2004

Technology Center 2100

Mail Stop RCE

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

PRELIMINARY AMENDMENT

Sir:

Prior to further examination on the merits, please amend the above-identified application

as follows:

A circular black ink stamp from the Office of Patent and Trademark. The text "OIP - JC91" is curved along the top inner edge. The date "FEB 05 2004" is stamped in the center. The text "PATENT & TRADEMARK OFFICE" is curved along the bottom inner edge.

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: Examiner: R. A. Jarrett

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: Group Art Unit: 2125

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: Confirmation No.: 2803

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Sir:

☒ **X** No additional fee is required.

CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	15	MINUS	47	= 0	x \$9 \$18	\$0.00
INDEP. CLAIMS	1	MINUS	9	= 0	x \$42 \$84	\$0.00
Fee for Multiple Dependent claims \$140/\$280						—
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT						\$0.00

- ☐ °Verified Statement claiming small entity status is enclosed, if not filed previously.
- ☐ A check in the amount of \$ _____ is enclosed including the additional claims fee.
- ☐ Charge \$ ____ to Deposit Account No. 06-1205. A duplicate of this sheet is enclosed.
- ☒ Any prior general authorization to charge an issue fee under 37 CFR 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 CFR 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate of this paper is enclosed.
- ☐ A check in the amount of \$ _____ to cover the fee for a two month extension is enclosed.
- ☐ A check in the amount of \$ _____ to cover the Information Disclosure Statement fee is enclosed.
- ☒ Applicants' undersigned attorney may be reached in our Washington, D.C. office by telephone at (202) 530-1010. All correspondence should be directed to our address given below.

Respectfully submitted,



Attorney for Applicants
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